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**\*BIBDATASHEET\***

**CONFIRMATION NO. 4877**

Bib Data Sheet

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**\*\* CONTINUING DATA \*\*\*\*\***

HN

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

HN

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\***

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance HN	Examiner's Signature Initials	STATE OR COUNTRY NY	SHEETS DRAWING 3	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 9
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**ADDRESS**

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**TITLE**

Illumination compensator for curved surface lithography

FILING FEE RECEIVED 679	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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